

## Application To Vest Retirement Funds

I hereby request that my retirement contributions and interest remain in the Seattle City Employees' Retirement System.

***Please check one:***

- ☐ I am leaving the public sector.  
☐ I am establishing dual membership.

***I understand that:***

1. I must have 5 years of retirement service credit.
2. At retirement age, I may request a monthly pension, which will be based on my age, salary and number of years of service, or the value of my accumulated contributions with interest plus a like amount to approximate the employer's matching contributions, whichever method provides a greater benefit.
3. I may, at any time, change this decision and have my contributions plus interest refunded to me.
4. Vesting my retirement funds will not entitle me to sick leave pay off.
5. I will not be permitted to continue under the "Death Benefit" plan.
6. I will not be permitted to purchase group medical/dental coverage through the Retirement System at retirement.

Date of Application:	Signature:
	Printed Name:
Department:	Address:
Title:	City: ST.: Zip:
Member Date:	Telephone #:
Date Separated:	Social Security #:
Approximate Contributions: \$	Birth Date of Applicant:
	Birth Date of Spouse: (or Domestic Partner if Affidavit is filed with the Retirement Office)

### Seattle City Employees' Retirement System

801 3<sup>rd</sup> Ave., Suite 300, Seattle, WA, 98104 Telephone: (206)386-1293, Fax: (206)386-1506